

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)

CONFIRMATION NO. 8870

|  |   |                                  |   |   |
|--|---|----------------------------------|---|---|
| <b>TITLE NUMBER</b><br>10/579,733  | <b>FILING or 371(c) DATE</b><br>12/07/2006<br><b>RULE</b>   | <b>CLASS</b><br>370              | <b>GROUP ART UNIT</b><br>2416   | <b>ATTORNEY DOCKET NO.</b><br>4035-0180PUS1 |
| <b>APPLICANTS</b><br>Masugi Inoue, Tokyo, JAPAN;<br>Mikio Hasegawa, Tokyo, JAPAN;<br>Khaled Mahmud, Tokyo, JAPAN;<br>Homare Murakami, Tokyo, JAPAN;  |   |                                  |   |   |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/JP03/14724 11/19/2003  |   |                                  |   |   |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                                  |   |   |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>01/29/2007   |   |                                  |   |   |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and /CHARLES C JIANG/<br>Acknowledged <u>Examiner's Signature</u> | <input type="checkbox"/> Met after Allowance<br>Initials  | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWINGS</b><br>18  | <b>TOTAL CLAIMS</b><br>4                    |
|  |   |                                  |   | <b>INDEPENDENT CLAIMS</b><br>1              |
| <b>ADDRESS</b><br>BIRCH STEWART KOLASCH & BIRCH<br>PO BOX 747<br>FALLS CHURCH, VA 22040-0747<br>UNITED STATES  |   |                                  |   |   |
| <b>TITLE</b><br>Wireless communications system   |   |                                  |   |   |
| <b>FILING FEE RECEIVED</b><br>1030   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |